

Please type a plus sign (+) inside this box Approved for use through 10/31/2002. OMB 0651-0032  
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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. Cannon 119-107-61

First Named Inventor James A. Johanson

Title BLUETOOTH DEVICE POSITION DISPLAY

Express Mail Label No.

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1.  Fee Transmittal Form (e.g., PTO/SB/17)  
*(Submit an original, and a duplicate for fee processing)*
2.  Applicant claims small entity status.  
See 37 CFR 1.27
3.  Specification [Total Pages 17]   
*(preferred arrangement set forth below)*
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4.  Drawing(s) (35 U.S.C. 113) [Total Sheets 5]
5. Oath or Declaration [Total Pages 6]
  - a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 CFR 1.63(d))  
*(for continuation/division with Box 18 completed)*
    - i.  DELETION OF INVENTOR(S)  
*Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).*
6.  Application Data Sheet. See 37 CFR 1.76

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76

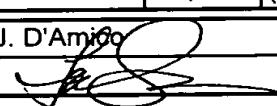
 Continuation     Divisional     Continuation-in-part (CIP)    of prior application No.: \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_

Group / Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS** Customer Number or Bar Code Labelor  Correspondence address below

Name	DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Thomas J. D'Amico				
Address	2101 L Street NW				
City	Washington	State		Zip Code	20037-1526
Country		Telephone	(202) 785-9700	Fax	(202) 887-0689
Name (Print/Type)	Thomas J. D'Amico		Registration No. (Attorney/Agent)		
Signature			Date	February 7, 2001	

Please type a plus sign inside this box 

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	Not Yet Assigned
		Filing Date	February 7, 2001
		First Named Inventor	James A. Johanson
		Group Art Unit	N/A
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission		Attorney Docket Number	Cannon 119-107-61

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual Name	DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Thomas J. D'Amico, Reg. No. 28, 371
Signature	
Date	February 7, 2001

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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 1,152.00)

## Complete if Known

Application Number	Not Yet Assigned
Filing Date	February 7, 2001
First Named Inventor	James A. Johanson
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METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																																																																																																																																																																																																																										
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number <b>12-2325</b></p> <p>Deposit Account Name _____</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17      <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p>3. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th colspan="4">Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th colspan="4"></th> <th></th> </tr> </thead> <tbody> <tr> <td>105</td> <td>130</td> <td>205</td> <td>65</td> <td colspan="4">Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>127</td> <td>50</td> <td>227</td> <td>25</td> <td colspan="4">Surcharge - late provisional filing fee or cover sheet.</td> <td></td> </tr> <tr> <td>139</td> <td>130</td> <td>139</td> <td>130</td> <td colspan="4">Non-English specification</td> <td></td> </tr> <tr> <td>147</td> <td>2,520</td> <td>147</td> <td>2,520</td> <td colspan="4">For filing a request for ex parte reexamination</td> <td></td> </tr> <tr> <td>112</td> <td>920*</td> <td>112</td> <td>920*</td> <td colspan="4">Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>113</td> <td>1,840*</td> <td>113</td> <td>1,840*</td> <td colspan="4">Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>115</td> <td>110</td> <td>215</td> <td>55</td> <td colspan="4">Extension for reply within first month</td> <td></td> </tr> <tr> <td>116</td> <td>390</td> <td>216</td> <td>195</td> <td colspan="4">Extension for reply within second month</td> <td></td> </tr> <tr> <td>117</td> <td>890</td> <td>217</td> <td>445</td> <td colspan="4">Extension for reply within third month</td> <td></td> </tr> <tr> <td>118</td> <td>1,390</td> <td>218</td> <td>695</td> <td colspan="4">Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>128</td> <td>1,890</td> <td>228</td> <td>945</td> <td colspan="4">Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>119</td> <td>310</td> <td>219</td> <td>155</td> <td colspan="4">Notice of Appeal</td> <td></td> </tr> <tr> <td>120</td> <td>310</td> <td>220</td> <td>155</td> <td colspan="4">Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>121</td> <td>270</td> <td>221</td> <td>135</td> <td colspan="4">Request for oral hearing</td> <td></td> </tr> <tr> <td>138</td> <td>1,510</td> <td>138</td> <td>1,510</td> <td colspan="4">Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>140</td> <td>110</td> <td>240</td> <td>55</td> <td colspan="4">Petition to revive - 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\*\*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY						Complete (if applicable)	
Name (print/type)	Thomas J. D'Amico	<i>[Signature]</i>	Registration No. (Attorney/Agent)	28,371	Telephone	(202) 828-2232	
Signature				Date	February 7, 2001		